

# **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## FORM D

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response ... 1.00

SEC USE ONLY

Serial

Prefix

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TICE OF SALE OF SECURITIES EN	
URSUANT TO REGULATION D,	AVAILO
SECTION 4(6), AND/OR	AVAILABLE
MILMITED OPPODING EVENDTION	- W

SECTION 4(0), AND/OR	DATE RECEIVED
UNIFORM LIMITED OFFERING EXEMPTION	DATE RECEIVED
Name of Offering ( check if this is an amendment and name has changed, and indicate cl	nange.)
Issue offer and sale of limited partnership interests in Darwin Venture Capital Fund of Fun	ds, L.P.
Filing Under (Check box(es) that apply):  Rule 504 Rule 505 Rule 506 Se Type of Filing: New Filing Amendment	ction 4(6) ULOE
A. BASIC IDENTIFICATION DATA	Acres a some
Enter the information requested about the issuer	TO NOVER SOUTH
Name of Issuer ( check if this is an amendment and name has changed, and indicate cha	nge.)
Darwin Venture Capital Fund of Funds, L.P.	
Address of Executive Offices: (Number and Street, City, State, Zip Code)	Telephone Number (Including Area:Code)
230 California Street, Suite 501	(415) 362-0794
San Francisco, CA 94111	The state of the s
Address of Principal Business Operations: (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) SAME	
Brief Description of Business:	•
Financial services	
Type of Business Organization	
☐ corporation ☐ limited partnership, already formed ☐ other	er (please specify): PROCESSED
business trust limited partnership, to be formed	
Month Year	NOV 1 2 2004
Actual or Estimated Date of Incorporation or Organization: 0 6 0 3	Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation	on for State: DE THOMSON TO
CN for Canada; FN for other foreign jurisdictio	PINANI. IAIL
GENERAL INSTRUCTIONS	
Federal:	
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regi	Mation D or Section 4(6), 17 CFR 230 501
The fixed The The issues making an orienting of securities in remainer on all exemption under Regi	**************************************

et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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#### 2. Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and • Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Executive Officer ☐ Director Beneficial Owner General and/or Managing Partner Full Name (Last name first, if individual) Darwin Ventures., L.L.C. Business or Residence Address (Number and Street, City, State, Zip Code) 230 California Street, Suite 501, San Francisco, CA 94111 Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Rasmuson Foundation Business or Residence Address (Number and Street, City, State, Zip Code) 301 West Northern Lights, Suite 412, Anchorage, Ak 99503 Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) San Diego County Employees Retirement Association (SDCERA) Business or Residence Address (Number and Street, City, State, Zip Code) 401 West A Street Suite 1300, San Diego, CA 92101 Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) University of California Regents Business or Residence Address (Number and Street, City, State, Zip Code) 111 Broadway, Suite 1400, Oakland, CA 94607 Check Box(es) that Apply: Beneficial Owner Executive Officer □ Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

A. BASIC IDENTIFICATION DATA

B. INFORMATION ABOUT OFFERING													
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Yes No			
Answer also in Appendix, Column 2, if filing under ULOE.										•			
2. What is the minimum investment that will be accepted from any individual?													
3. Do	es the offe	ring permi	it joint owi	nership of	`a single u	nit?	•••••				•••••		Yes No □ ⊠
<ol> <li>Does the offering permit joint ownership of a single unit?</li> <li>Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commis-</li> </ol>													
sion or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states,													
list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. N/A													
Full N	ame (Last i	name first,	, if individ	ual)									
Busine	ess or Resid	lence Add	ress (Num	ber and Si	treet, City,	State, Zi	Code)						
Name	of Associa	ted Broker	or Dealer										
States	in Which F	Person Lis	ted Has So	licited or	Intends to	Solicit Pr	ırchasers						
	heck "All S											П	All States
													. III Giates
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN] -	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
	ame (Last i												
Busine	ss or Resid	lence Add	ress (Num	ber and S	treet, City,	State, Zij	Code)			.,,,,,,,,,,			
Name	of Associa	ted Broker	r or Dealer										
States	in Which F	Person Lis	ted Has Sc	licited or	Intends to	Solicit Pa	urchasers			·			
(C	heck "All S	States" or	check indi	vidual Sta	tes)		***************************************				••••		All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full N	ame (Last	name first,	, if individ	ual)									
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
_									All States				
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	· [GA]	[HI]	[ID]	
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Offering Price Type of Security Sold Debt..... Equity.... Preferred Common Convertible Securities (including warrants) Partnership Interests \$42,118,644.00\_\_\_\_ \$ 42,118,644.00\_\_ Other (Specify) Total ..... \$42.118.644.00 \$42,118,644.00 Answer also in Appendix, Column 3, if filing under ULOE 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases of the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases \$42,118,644.00 Accredited Investors 21 Non-accredited Investors Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. N/A Dollar Amount Type of Type of Offering Security Sold Rule 505..... Regulation A.... Rule 504..... Total ..... Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Excluded amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees □ \$ \_\_\_ Printing and Engraving Costs **⋈**\$ 10,000.00 Legal Fees **\$ 125,000.00** □ \$\_\_\_\_ Accounting Fees Engineering Fees

**S** \$ 135,000.00

Sales Commissions (specify finders' fees separately)

Other Expenses (identify)

Total .....

	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		· \$41,983,644.00
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	
	Salaries and fees	_	. 🗆 \$
	Purchase of real estate	🗆 \$	. 🗆 \$
	Purchase, rental or leasing and installation of machinery and equipment	🗆 \$	. 🗆 \$
	Construction or leasing of plant buildings and facilities		. 🗆 \$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	🗆 \$	s
	Repayment of indebtedness		
	Working capital		
	Other (specify) Investment Fund		
	oner (speeny) investment runu		
		🗆 \$	S
	Column Totals	🗆 \$0	\$ 41,983,644.00
	Total Payments Listed (column totals added)	🛛 🖺	41,983,644.00
	D. FEDERAL SIGNATURE		
follov	ssuer has duly caused this notice to be signed by the undersigned duly authorized person. If ving signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exch staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph	nange Commission, u	
	(Print or Type) Darwin Venture Capital Fund of Signature s, L.P.	Date /1/0	8/04
Name	e of Signer (Print or Type) * Title of Signer (Print or Type) Its	General Partner	
	By Peter Freudenthal		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

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Intentional misstatements or omissions of facts constitute federal criminal violations. (See 18 U.S.C. 1001.)

ATTENTION